

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101587.371

FILING DATE

7-26-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
			IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	1						51	1				
2		1						52	1				
3		1						53	1				
4		1						54	1				
5		1						55	1				
6		1						56	1				
7		1						57	1				
8		1						58	1				
9		1						59	1				
10		1						60	1				
11		1						61	1				
12		1						62	1				
13		1						63	1				
14		1						64	1				
15		1						65	1				
16		1						66	1				
17		1						67	1				
18		1						68	1				
19		1						69	1				
20		1						70	1				
21		1						71	1				
22		1						72	1				
23		1						73	1				
24		1						74	1				
25		1						75	1				
26		1						76	1				
27		1						77	1				
28		1						78	1				
29		1						79	1				
30		1						80	1				
31		1						81	1				
32		1						82	1				
33		1						83	1				
34		1						84					
35		1						85					
36		1						86					
37		1						87					
38		1						88					
39		1						89					
40		1						90					
41		1						91					
42		1						92					
43		1						93					
44	1							94					
45		1						95					
46		1						96					
47		1						97					
48		1						98					
49		1						99					
50		1						100					
TOTAL IND.			↓			↓				↓			↓
TOTAL DEP.			↔			↔				↔			↔
TOTAL CLAIMS													